

Florida Department of State  
Division of Corporations  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Division of Corporations  
Fax Number : (850) 617-6380

Account Name : BUSH ROSS, P.A.  
Account Number : I19990000150  
Phone : (813) 224-9255  
Fax Number : (813) 223-9620

Celeste Perrino  
(999999-999999)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 MAY -6 PM 1:00

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REGISTERED AGENT CHANGE

MASTER COLLISION REPAIR OF SOUTH TAMPA, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

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MAY 6. 2008 10:24AM

BUSH ROSS P A

NO. 5064 P. 2/3

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**COVER LETTER**

**To:** Amendment Section  
Division of Corporations

**SUBJECT:** Master Collision Repair of South Tampa, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P07000000661

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Celeste Perrino  
(Name of Contact Person)

Bush Ross, P.A.  
(Firm/Company)

1801 North Highland Avenue  
(Address)

Tampa, Florida 33626  
(City/State and Zip Code)

For further information concerning this matter, please call:

Celeste Perrino at ( 813 ) 204-6425  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

**Mailing Address:**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**  
Amendment Section  
Division of Corporations  
2661 Executive Center Circle  
Tallahassee, FL 32301

CR2E045 (8/05)

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 617.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Master Collision Repair of South Tampa, Inc.
2. The principal office address: 5002 S. Westshore Blvd., Tampa, FL 33611
3. The mailing address (if different): P. O. Box 290298, Tampa, FL 33687
4. Date of incorporation/qualification: 01/02/2007 Document number: P07000000661
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Joseph A. Probasco220 S. Franklin StreetTampa, FL 33602

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bush Ross Registered Agent Services, LLC1801 North Highland AvenueTampa, Florida 33602

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer or director)

DAVID M. MITALBERG, Pres.  
(Printed or typed name and title)

*I hereby accept the appointment as registered agent and agree to act in this capacity.*

*I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Of, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

[Signature]  
(Signature of Registered Agent)

April 30, 2008  
(Date)

If signing on behalf of an entity:

Celso Perrino, Vice President  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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